## Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

10689252

(Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			145					RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMB	BER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			√ \$ minus 20=		* O			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS					*			X43=		OR	X86=		
ML	ILTIPLE DEPE	NDENT CLAIM P	IESENT					+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in c						column 2		TOTAL		OR		720	
CLAIMS AS AMENDED - PART II								OTHER THAN					
	(Column 1) (Column 2) (Column 1) LIGHEST							SMALL		OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUMI PREVIC PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	•	
	Independent	<u> </u> *	Minus ***			= .		X43=		OR	X86=		
<u> </u>	FIRST PRESE	ENTATION OF MI	JLTIPLE DEI	PENDENI	CLAIM		1	+145=	,	OR	+290=		
. •		•	e.				L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	i	
		(Column 1)		(Colun	nn 2)	(Column 3)	,	ADDII. I EE I			ADDII. 1 E.E.		
AMENDMENT B	•	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA		· RATE .	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Ind pendent	*	Minus	***	*	=		X43=		OR	X86=	:	
۷	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							·		On			
							.[	+145=		OR	+290=	•	
	•			-			,	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	•	
		(Column 1)	,	(Colum		(Column 3)							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	-	
	Independent	* '	Minus	***		=		X43=	:	OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		ı			
* 14	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=		
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."								·	OR ,	TOTAL ADDIT. FEE		
		nber Pr viously Paid					r fou	nd in the app	ropriate box	in col	umn 1.		